

Submit 3 Copies
to Appropriate
District Office

1 File
1 Conoco

Energy, Minerals and Natural Resources Department

Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-045-28332

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
LG-3045-1

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

DUGAN PRODUCTION CORP.

3. Address of Operator

P.O. BOX 420, FARMINGTON, NM 87499

7. Lease Name or Unit Agreement Name

Bi-Knobs Com

8. Well No.

90

9. Pool name or Wildcat

Basin Fruitland Coal

4. Well Location

Unit Letter M : 1245 Feet From The South Line and 1200 Feet From The West Line

Section 32 Township 30 North Range 14 West NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

5396' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Extend approved APD ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

RECEIVED

OCT 18 1991

OIL CON. DIV.
DIST. 3

Request a six month extension of time on approved A.P.D.

APPROVAL EXPIRES 4-17-92
UNLESS DRILLING IS COMMENCED.
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Jim L. Jacobs

TITLE

Geologist

DATE 10-17-91

TYPE OR PRINT NAME

Jim L. Jacobs

TELEPHONE NO.

(This space for State Use)

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

APPROVED BY

TITLE

DATE OCT 18 1991

CONDITIONS OF APPROVAL, IF ANY: